File with: Secretary of State State Capitol, 7th Floor 1700 W. Washington Street Phoenix, AZ 85007-2808

Attn: Election Services Division

PRINCIPAL* REGISTRATION

FOR LOBBYING

ARE LOBBYISTS COMPENSATED?

IF SO, CHECK BOX AND ATTACH

CHECK FOR \$25 TO:

ARIZONA SECRETARY OF STATE □

A.R.S. § 41-1232 INITIAL REGISTRATION ☐ RENEWAL OF REGISTRATION ☐

Please type or print clearly.	_	RENEW	/AL OF REGISTRATION \Box
PRINCIPAL ID NUMBER:			
NAME OF PRINCIPAL *:		BUSINESS TELEPHONE #:	BUSINESS FAX #:
BUSINESS ADDRESS:	CITY	STATE	ZIP CODE
NAME OF DESIGNATED LOBBYIST *		BUSINESS TELEPHONE #:	BUSINESS FAX # .
NAME OF DESIGNATED LOBBITST	•	BOOMEOS TELLI HOME #.	DOSINESS LAX#.
BUSINESS ADDRESS:	CITY	STATE	ZIP CODE
BUSINESS ADDRESS.	CITT	SIAIE	ZIP CODE
Please explain the nature of the print	mary business or activity, is:	sue, interest, or purpose of t	he principal:
Term of engagement of designated	lobbyist is: ☐ Indefinit	to D From registration d	late to
 Expenses for which designated lob 	byist is to be reimbursed: (C	Check all that apply) Li Me	eals 🗆 Travel
☐ Lodging ☐ Out of Pocket	et Expenses ☐ Other (Please describe)	
Attached is the required List of	State Agencies		
Check the box and attach Sched	dule A if lobbyists for com	pensation* are retained by	the principal □
Check the box and attach Sched	-	-	
Check the box and attach Sched		_	
• Check the box and attach Sched	fule C to list additional em	ployees wile lobby for this	
→ NOTICE: Within five (5) business da	ays of any changes, amende	ed forms must be filed. [§41-	-1232(C)]
STATE OF)		
COUNTY OF) ss		
	,		
I, the undersigned, being duly s best of my knowledge and belief the infe			is complete and that to the
seet of my michieuge and sener the mi	omation above to true and c		
		Signature of Designated Lo	obbyist
SUBSCRIBED AND SWORN TO (Affire	med) before me on		
		Date	
My Commission Expires		Notary Public	